

CLAIMS ONLY

Application Number

10576769

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11	1					
12	1	1				
13						
14	1					
15	1					
16	1					
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22						
23						
24	1					
25						
26	1					
27		8				
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49						
50						
Total Indep	7					
Total Depend	3					
Total Claims	10					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						